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Under the Page 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number. PATERINE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 10/006,880 APPLICATION AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Cotumn 2) NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) FEE (\$) RATE (\$) BASIC FEE N/A NIA NA N/A 740 (37 CFR 1.18(a), (b), or (c)) SEARCH FEE N/A N/A WA N/A (37 CFR 1.16(k), (), or (m)) EXAMINATION FEE N/A N/A M/A (37 CFR 1.15(o), (p), or (q)) NVΔ TOTAL CLAIMS Ø (37 CFR 1.16(1)) minus 20 = Ø Ø OR INDEPENDENT CLAIMS 3 Ø (37 CFR 1.16(h)) minus 3 = If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()) MA N/A Ø 140 If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Cotumn 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST NUMBER PREVIOUSLY REMAINING PRESENT RATE (\$) ADDI-RATE (\$) ADDI AFTER **EXTRA** TIONAL TIONAL ENDMENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.166)) Minus = Ø 20 // Ø Ø OR Independent (37 CFR 1,1804) 3 4 200 x 200 = = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)) Ø N/A OR N/A TOTAL TOTAL OS 200 ADD'L FEE OR ADD'L FEE (Cotumn 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADD1-RATE (\$) ADDI-8 **EXTRA** TIONAL FEE (\$) AFTER PREVIOUS Y TIONAL FEE (\$) AMENDMENT PAID FOR Total (37 CFR 1.165)) Minus = OR AMENDA independent (37 CFR 1.160d) = OR = Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II) N/A OR N/A TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Peid For' IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Peid For' IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADORESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.